# Lesson 46 - When To Employ Fasting; Determining Who Should Fast; How Long And How Often


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## Part I: When To Fast

Regarding the proper time to fast, Dr. Shelton maintained that the time to fast is "when it is needed." He states, "I am of the decided opinion that delay pays no dividends; that, due to the fact that the progressive development of pathological changes in the structures of the body with the consequent impairment of its functions does not cease until its cause has been completely and thoroughly removed. Putting off the time for a fast only invites added troubles and makes a longer fast necessary, if indeed, it does not make the fast futile. I do not believe that any condition of impaired health should be tolerated and permitted to become greater. Now is the time to begin the work of restoring good health; not next week, next summer, or next year."

So it is agreed that, when needed, fasting should begin as soon as possible. But how do you determine when fasting is needed? There will be definite indications that will manifest themselves, and at this point, there will be no question that a fast is required.

## 1. Absence Of Hunger

We can assume that when there is no hunger, there is also no physiological need for food. Hunger will be absent when: (1) there is no need for food, such as soon after a meal, and (2) when there is an inability to digest and assimilate food, such as occurs during acute diseases (e.g., colds, flu, etc.). When hunger is absent, therefore, no food should betaken.

If food is taken when the body lacks the ability to digest, putrefaction or fermentation takes place. This will result in the liberation of toxic by-products from the decomposition within the stomach. Toxins thus liberated enter the blood and tissues and contribute to toxicosis.

Pain, fever, inflammation, and abdominal distress cause one to lose his normal desire for food. Under such conditions you should refrain from eating until hunger returns. In acute disease, hunger is not present because the vital energy of the body is diverted into other channels. Since all energies are directed toward healing and repair, there is none to spare to carry on digestive work. Blood is also diverted toward the parts requiring healing. Under these circumstances, digestion is completely suspended. Yet, food is often taken under medical advice. It is said that we "must eat in order to keep up our strength." In such cases, the food is often vomited or expelled through the digestive tract by means

of diarrhea. If not, the food becomes a burden adding to the poisoning of the body.

Even when these unwanted food materials are expelled from the body, precious vital energy is used up during the process. Forces are diverted from the work of repair and wastefully expended in an effort that could have easily been avoided by fasting. Recuperation is thus slowed.

In many cases, during acute and chronic diseases, a person may feel hungry. In reality, it is not hunger that he feels but a morbid craving for food. Hunger is often misinterpreted by a headache, irritability, restlessness, lassitude, drowsiness, faintness, a feeling of emptiness, gnawing pains in the stomach, etc. In fact, none of these symptoms indicate true hunger. Hunger is a normal, pleasant physiological demand for food that is felt in the mouth and throat as is thirst. Since it is a normal occurrence, it is not accompanied by pain or discomfort.

## 1.1 Hunger vs. Appetite

One simple method of determining true hunger is to think of how much time has elapsed since the last meal. If you desire to eat while the last meal is still digesting you are not hungry. If your last meal was a heavy one that included nuts or avocado, your next meal should not be for at least four to five hours.

Remember that genuine hunger is not associated with pain or discomfort. A healthy individual can easily miss a meal or two without feeling weak or experiencing pain. If he does, it is a sure sign that a fast is indicated, followed by a change in eating habits.

People who feel faint or experience headaches upon missing a meal are going through "withdrawal symptoms" from the addictive substances that they ingest with their foods. The more one is addicted to salt, condiments, coffee, tea, etc., the more severe the symptoms. The quickest, surest, and safest method of ridding yourself of these addictions is through a fast. Dr. Susanna W. Dodds stated that "the sense of all-goneness in these cases is not from a lack of nutrient material, but owing to the absence of the habitual stimulus."

The hunger of the poorly-nourished individual (one who consumes processed foods such as refined sugar and flour; cooked foods; meat; etc.) is of the same nature as the drug addict who is deprived of his drug. They experience such symptoms as gastric distress, pains in the stomach region, a gnawing in the stomach, weakness, headache, etc.

On the contrary, normal muscular contractions are not painful, they tend to be pleasurable. Hunger is not a pathological state and is not manifested by symptoms of disease.

Dr. Shelton says, "The truly hungry person has no consciousness of his stomach and does not suffer any morbid symptoms. Indeed, genuine hunger is such a delightful sensation that it is worth going on a fast merely for the pleasure of experiencing it."

## 2. Fasting In Acute Disease

The rule of nature in acute disease is *go to bed, keep warm, and abstain from all food until hunger returns*. Fasting in fevers was commonly employed by Neapolitan physicians over one-hundred-and-fifty years ago. They frequently permitted their fever patients to go for as long as forty days without food. Dr. Shelton states, "When in pneumonia and pleurisy, the patient is fed, not only is the toxic saturation kept up, but feeding retards resolution; that is, it prevents the inflamed lungs and pleura from returning to normal."

When animals become sick, they instinctively refrain from eating. They remain quiet and rest until their appetite returns and at that time, it is a sure sign that they are recovered. The same requirements apply to man. That is, quiet, rest, and fasting, with a little water as demanded by thirst. But often, man refuses to allow himself to be guided by instinct as the animal does, and eats in spite of lack of hunger. By so doing, he weakens his body even more.

In all types of acute diseases, the whole organism is occupied in the task of eliminating toxins. It is perfectly natural that the body should rebel against food during this time. Such symptoms as anorexia, bad breath, coated tongue, nausea, vomiting, excretion of mucus, diarrhea, etc., indicates that the body is occupied in the work of elimination and is not able to digest food.

## 2.1 Feeding The Sick

During acute illnesses, it is often advised that meat broths be served. These broths *not* only do not contribute to health but produce the "soil" for disease. During my bacteriology classes at school, we often used meat medias to culture our bacteria. This media proved excellent for producing large colonies of various types of bacteria since the "soil" or "food" for these bacteria was close to ideal. While we know that bacteria do not cause disease, they are present in many disease conditions. When the "soil" is ideal for bacteria to proliferate, they will do so. This is an excellent indication of toxicosis due to the decomposition of food and bacteria in the stomach and digestive tract.

Since acute disease is an effort on the part of the body to rid itself of excess toxins, you should not interfere with or abort that effort by adding more toxins to the body by ingesting the exact food that resulted in excess toxins to accumulate in the first place. Actually, even the best foods are potential toxins during acute illnesses.

Dr. Shelton says that one of the rules for the sick is to stop the absorption of all toxins from the outside. He states, "Feeding during acute 'disease' does just the opposite. It keeps the digestive tract full of decaying animal and vegetable matter, which the body must void or absorb. Putrescence arising from gastro-intestinal decomposition, grafted onto the pre-existing enervation, toxemia and dyscrasis, form the cause of practically all the so-called 'diseases' from which man suffers."

During acute gastritis, the mucous membrane of the stomach is red and swollen. There is little gastric juice and very little acid excreted, with considerable amounts of mucus present. With the stomach in this condition, and with appetite lacking, it would be senseless to eat. Fasting in such a case is the only rational procedure. Without the irritating presence of food and its products of decomposition, the body will proceed to heal and health will be restored.

### 2.1.1 Peptic Ulcer

An example of feeding during disease is demonstrated in the peptic ulcer patient. Peptic ulcer is the general term given to an eroded mucosal lesion in the stomach or the duodenum. It is claimed that excessive excretion of hydrochloric acid is the cause of this condition. While this may be the irritating or immediate cause, the underlying reason the hydrochloric acid is secreted above normal is due to general enervation and toxicosis. The generally accepted dietary "therapy" involves a "bland" diet. This diet consists of exactly those foods that contributed to the general enervation and toxicosis in the first place. Foods often recommended include milk, eggs, cooked refined cereals, custard, Jell-O, ice cream, white bread, cheese, and creamed soups. These foodless "foods" do not contribute to health.

Complete abstinence from food is indicated in such cases to allow the body to heal without the irritation of food. This, is the quickest and surest manner to recover health. The strong "hunger pains" that are said to be felt by such patients are not true hunger.

Another example of feeding in disease is dietary therapy for such intestinal disease as diverticulosis and diverticulitis. Instead of searching for the underlying cause of this condition, physicians palliate symptoms and make matters worse. Dietary therapy in such cases would make any well man sick. It includes milk, coffee, tea, carbonated beverages, eggs, cheese, meat, soups, cooked strained vegetables, cooked strained fruits, white refined bread, refined cereals, white rice, macaroni, noodles, spaghetti, and other refined products. Man could live many times longer on water alone than he could on the diet described for diverticulosis. Any value found in the fruits and vegetables are cooked away, and straining and pureeing makes them worse. Again, a fast is indicated followed by correct eating habits and the

body will once again be restored to normal.

### 2.1.2 Pain

Any pain that a person may experience is known to lessen while fasting. Dr. Shelton has witnessed many patients with pains of acute articular rheumatism subside and the patient became comfortable after three or four days of fasting.

## 3. Fasting In Chronic Disease

The time to fast is before a disease becomes chronic. If a fast is undertaken when the symptoms of acute disease first manifest themselves and a more healthy lifestyle is adhered to, chronic diseases will not occur. What often happens, however, is that when symptoms of acute illnesses arise, they are suppressed by various drugs, etc. The body is never allowed to eliminate its toxic overloads that have accumulated over a period of time due to unhealthful living habits. Due to this constant suppression and continued bad habits, chronic diseases develop. At this point, many people turn to fasting as "a last resort."

In spite of all the abuses that the body has been put through previously, beneficial results occur through a fast at this time. One important feature about fasting in chronic diseases is the marked acceleration of eliminations that occurs. The body is thus speedily freed of its accumulated toxic load. Symptoms disappear that were sometimes of years standing. In this regard, Dr. Shelton says, "A properly conducted fast will enable the chronically ill body to excrete the toxic load that is responsible for the trouble, after which a corrected mode of living enables the individual to evolve into a vigorous state of health."

Fasting has been instrumental in bringing about the recovery of persons suffering from asthma, arthritis, diabetes, various tumors, heart disorders, and numerous other diseases. Why was fasting so effective in all of these diverse diseases? The reason is that the diseases may differ as to the symptoms that they manifest but the underlying causes remain the same. Two people practice bad habits for years, one of them being about as indulgent as the other, and one of them develops asthma, the other develops arthritis. Health may be restored in each case by the same means—fasting.

Dr. Shelton cites a case of a young singer who had developed a serious asthmatic condition and could no longer sing. The doctor gave her no hope and told her that there was no "cure" for asthma. She finally had to give up singing, and she retired to her farm. Then she heard about Natural Hygiene and the concept of the importance of the body's own healing capacity. She decided to give this system a chance. Upon consulting with Dr. Shelton, she decided to fast. In a matter of weeks, the asthma cleared; and within a few months, she was back singing. Her career had been saved and so was her health. Keep in mind, however, that fasting did not do anything, but provided the ideal conditions for the body to heal.

Another example of fasting in chronic disease is cited by Dr. Shelton. This case involved a man who had arthritis for twenty-eight years. Dr. Shelton describes the case:

"With the passage of the years, joint after joint became involved until the patient was a twisted and distorted man walking with the aid of crutch and cane, in a much stooped position. He was unable to turn his head from side to side, and he was in constant pain.

"He was told that there was a possibility that some of his joints would remain ankylosed. There is no way to unfuse ankylosed joints. They remain fixed, immovable. The good news was, in this case, however, that he could be freed of pain. He could be restored to usefulness and he could enjoy life.

"This man underwent a lengthy fast—one of thirty-six days. There was great improvement. He was freed of pain, witnessed the disappearance of swelling from some of his joints, its reduction in others, and the slow return of movements to joints that had long been stiff.

"It took four years to complete all the improvements possible in this man. During this time, he had a second long fast and several fasts of a few days each. His eating between fasts was carefully supervised. He was given daily sun baths; and after a certain amount of initial improvement had been made, he was

given daily exercise.

"Result: his spine is almost straight, the use of his arms and legs is normal, he can turn his head, he walks in a nearly upright position, he does not use cane or crutch, he has no pain, he looks the 'picture of health,' and he works like a slave."

This case was an extreme one requiring a lengthy period for recovery but it serves to illustrate what the body can accomplish when given the proper conditions.

## 4. Fasting To Lose Weight

Dr. Dewey said, "There are no overweights who would not receive the greatest benefit by a fast that would diminish the pounds to that of the ripest maturity of life, a fast that would be determined by the time required to reach the desired number of pounds."

Fasting is not only a quick, safe, and effective way to lose weight but the added benefit of ridding the body of toxic debris is a bonus. Fasting will help the obese individual overcome his food addictions to sugar, caffeine, and junk food, and make a smooth transition to a more healthful way of eating.

When the overweight individual undergoes a marked reduction of weight during a fast, general improved health is indicated by freer breathing, greater ease of movement, increase of energy, cessation of symptoms of indigestion and other discomforts, lowered blood pressure, and lessening of the load the heart has to carry.

On the average, the individual loses about two-and-one half pounds a day on a fast. Since hunger is almost always absent during this fast, it is a much more pleasant way to lose weight than the popular reducing diets. These diets often include unwholesome foods, and weight loss is often minimal. The dieter soon becomes discouraged and once again indulges in his former manner of eating. If weight loss is obtained through such a diet, it often results in flabbiness or sagging of the skin and tissues. This does not usually occur during the fast. So fasting is rapid and fast, more pleasant than reducing diets, and no flabbiness or sagging of the skin results.

People often ask how much weight loss per day is safe in fasting? Dr. Shelton says that the body itself decides what rate of loss is proper. When fat tissue is soft and flabby, weight is usually lost rapidly in the early days of the fast. In other individuals, the rate of loss may be considerably slower, but the end result will be the same. That is, total weight reduction and improved overall health.

## 5. Drug Addictions

Any form of drug addiction is a foolish attempt to obtain relief from headaches, nervousness, irritability, and other symptoms through suppression. The craving for these drugs inevitably leads to enervation of the nervous system. Addicts will take their coffee, alcohol, tobacco, etc., to "calm their nerves" and they feel faint and weak without them. This is an illusion. The drug effect makes them unaware of their true condition. These poisons do not make them stronger but result in more weakness and enervation. It is not the drug that forms the habit but it is man. And it is he who must suffer the consequences from his unwise habits.

Nothing enables the drug addict to overcome his false "need" for his poisons better than does the fast. Few drug addicts have sufficient willpower or physical strength to overcome their addictions without help, and the fast will provide such assistance. These people will be able to abandon their former habits and their overall health will be markedly improved.

## 5.1 Alcoholism

The alcohol habit progresses slowly until it reaches a chronic stage. During this progression, all bodily systems have become enervated and damaged to a certain extent. The alcoholic is a chronically-sick

individual. With this in mind we can readily see why fasting is of great benefit in this case. During this period of rest, the abused organism undergoes healing and repair and eventually regains its wasted vital energies. By the end of the fast, the body will have eliminated its accumulated toxins and the nervous system will be restored to health (as far as there was no permanent damage).

Alcoholism is an illness involving structural abnormalities. It has been found that alcohol causes damage to all tissues where it comes into contact. As a person drinks a glass of alcohol, it causes damage to the esophagus by direct chemical irritation to its mucosa, by inducing severe vomiting that tears the mucosa, or by interfering with normal motor functions thereby causing an upward movement of the stomach acid into the esophagus where it can erode the tissues.

As the alcohol passes into the stomach, it includes inflammation and bleeding lesions of the stomach. The degree of the damage it causes to the stomach lining appears to be related to alcohol concentration, with damage to the cells occurring rapidly after alcohol ingestion. In the small intestine, the impeding peristaltic waves are decreased by alcohol and propulsive waves are unchanged, resulting in an increased rate of propulsion through the small intestine. This effect is seen as a possible contributing factor to the diarrhea frequently experienced by binge-drinking alcoholics. Intestinal malabsorption may also result from alcohol ingestion.

As alcohol passes through the liver, it inhibits the conversion of amino acids to glucose. Alcohol can also stimulate hepatic synthesis of certain other proteins, including lipoproteins that transport fats in the blood. This effect may explain the elevated blood triglyceride (fat) levels frequently seen after alcohol ingestion. The alteration in fat metabolism may result in a gradual accumulation of fat in the liver and a "fatty liver." This condition can result in the liver failure and death. Alcoholic hepatitis is a major effect of heavy chronic alcohol consumption and may be a precursor stage of cirrhosis. Cirrhosis is a chronic inflammatory disease of the liver where functioning liver cells are replaced by scar tissue.

Alcohol has adverse effects on the nervous system. Brain nerve cells generate and conduct electricity, transmitting information to an adjacent nerve cell by the release of specific chemicals called neurotransmitters. The receiving cell provides feedback to the transmitting cell regarding the message sent. Each cell can receive and integrate information from many others, a function that alcohol can alter.

Electrical currents in nerves are transmitted from the membrane of the nerve cells to the inner cell. This mechanism is closed when the resistance of the cell membrane is reduced at any point, resulting in electrical changes carried by sodium and potassium ions flowing across the membrane in a movement called the action potential. Alcohol impairs the opening of the mechanism, so the nerve has difficulty refiring. Neurophysiologic studies have shown that ethanol inhibits the sodium current in the action potential.

Alcohol consumption results in heart enlargement, abnormal heart signs, edema, enlargement of the spleen or liver, noisy breathing, electrocardiographic abnormalities, and disturbances of cardiac rhythm and conduction.

Dr. Dewey maintained that the alcoholic can only recover his health through a fast. He says, "Only through a fast that shall let that distressed stomach become new from regeneration, that will let the brain accumulate rest in reserve."

When the alcoholic fasts, the tissues of the stomach, intestines, liver, heart, nerves, etc., begin to repair themselves and healing takes place. Glands and nerves that have been so enervated by overstimulation are allowed to rest. Nerve energy is restored; and by the end of the fast, the former alcoholic feels stronger and more vital than ever before. He will no longer desire alcohol as Dr. Shelton explains:

"When the alcoholic has fully recovered from his illness and hunger has returned, no form of alcoholic drink will tempt him and should he attempt to drink some form, he will discover that he no longer 'likes' it. It will *bite* and *sling* as it did when he first took it as a youth. He will be a free man again—no longer a slave to King Alcohol."

## 5.2 Tobacco

The use of tobacco results in symptoms of irritability, grouchiness, nervousness, and uneasiness. The user of tobacco may repeatedly try to discontinue this habit but fails and returns to his poison to supposedly sooth those same symptoms that were first induced by the tobacco. He lacks the willpower and determination to stick it out until the nerves have repaired themselves.

Fasting is extremely useful in these cases. It makes the discontinuing of the tobacco habit very easy, and in a few days, the very taste of this substance becomes repulsive. Dr. Shelton says, "I have seen heavy smokers who smoked half a lifetime, after a fast, become so 'sensitive' to the obnoxious fumes of tobacco that the odor of a cigar wafted to their nostrils from a block away was objectionable to them."

## 5.3 Other Drugs

In all other drug addictions (such as marijhuana, cocaine, heroin, etc.) rest—physical, mental, and physiological—is the greatest need. After a short time, the craving for these poisons will diminish and soon disappear. The gradual tapering-off process that is often resorted to for drug addicts is not a wise procedure as this process continues to injure, and no real benefits are gained.

At the very onset of the fast, often violent withdrawal reactions take place. It is recommended that these fasts take place under the direct supervision of one who is experienced in fasting. These withdrawal reactions soon cease as the patient continues the fast. The body will then proceed to repair the damage that was done by the drugs, and toxins will be eliminated. Of the many cases that Dr. Shelton has observed at his Health School, he states that none have ever returned to their former drug use.



## Part II: Determining Who Should Fast

Dr. Shelton says, "There, is hardly a time of life or a condition of body in which a fast cannot be helpful." There are some individuals who should only fast under supervision, but, in general, everyone can be benefitted by an occasional fast. You do not have to be acutely sick or suffering from some chronic ailment to profit from a fast. This physiological rest provides an opportunity for the body to restore vital energy that cannot be accomplished as well by rest alone. When the body is greatly fatigued, there is reduced ability to digest food. It would be unwise to eat under such circumstances. Rest is needed. When the body has regained vitality and hunger returns, the fast should be broken.

To eat a certain number of calories or a certain amount of high-grade protein will not insure health if the body is unable to properly digest and assimilate it. You may eat the best of organically-grown food but if the body is exhausted or under emotional stress, the food will ferment, and instead of contributing to health, there will be an opposite effect. Toxicosis will result from the decomposition of these foods. The proper response, under these circumstances, would be to fast until such foods can be digested.

Dr. Shelton states, "Our golden rule in eating has long been: *if not comfortable in mind and body from one meal to the next, miss the meal*. If the healthy individual overeats, eats under states of fatigue or excitement so that discomfort follows the meal, it is well to miss the next meal. If there is worry, fear, anxiety, grief, inner conflict, or other emotional stress, miss one or more meals."

## 1. Fasting For Children

Children often instinctively know when to fast and for how long. When the child refuses food, it is best to leave him alone until natural hunger presents itself, and he will demand food at that time. Children will lack all desire for food when they are ill. When they are enervated and toxicosis presents itself in the symptoms of gastritis, enlarged tonsils, constipation, diarrhea, gastritis, feverishness, etc., there will be no demand for food. Under such circumstances, the child should be allowed to fast until all symptoms disappear and hunger returns. These children should never be forced to eat as food will decompose in the stomach and its toxins will just make matters worse.

In dealing with the child, competent Hygienic guidance should be sought and followed. Sometimes a child may request food even though he is suffering from a cold or flu, but food should not be given until all symptoms have subsided.

Dr. Emmet Densmore says, "It is frequently, perhaps usually, said of this or that or the other baby that it is fretful or peevish. It is fretful because it is ill, and it is ill usually because of improper feeding. The same error that adult human beings make in regard to themselves is made in regard to the feeding of children—they are fed too often and too much."

Infants may suffer from indigestion due to excessive handling, overfeeding, or eating candy and other unwholesome foods. One of the first signs of such indigestion is noticed by white specks in the bowel movements. This indicates that the milk is not being digested. It is often wise to skip a feeding or two at this point. If the condition is corrected at this point, no other adverse consequences will develop and health will be restored promptly. If not corrected, inflammation of the stomach, small intestine, and large intestine may develop.

It is also important that the infants and children be properly fed after the fast. A diet of fresh raw fruits, vegetables, and nuts is proper for the child. Mother's milk is ideal for the young infant followed later by freshly-made fruit juices or fruit purees made from fresh raw fruits.

Regarding the proper food for infants and children. Dr. Densmore says, "Cereal or grain and all starch foods are unwholesome for all human beings; but this diet is especially unfavorable for children, and more especially for babies. The intestinal ferments which are required for the digestion of starch foods are not secreted until the infant is about a year old; and these ferments are not as vigorous as in adults for some years. All starch foods depend upon these intestinal ferments (enzymes) for digestion, whereas dates, figs, etc., are more nourishing than bread and cereals, and are easily digested—the larger proportion of the nourishment from such fruits being ready for absorption and assimilation as soon as eaten."

Concerning fasting in children Dr. Shelton states, "....while always acting under proper Hygienic direction with your child, do all that you can to let the natural tools of rest, and peace and quiet restore the child if there is upset or illness—or even if it is only a question of how much he wants to eat.

"For there are ways in which the instinctive wisdom of the infant or child in such matters may be far greater than we could possibly guess."

## 2. Fasting In Pregnancy

Pregnancy is a normal biological process that should not be accompanied by pain, discomfort, or any abnormal condition. In their natural state, animals do not suffer with nausea and vomiting during pregnancy. Primitive women are said to experience no sickness during pregnancy. This indicates that "morning sickness" and vomiting are not normal developments during pregnancy. If a woman suffers nausea and vomiting, it is not due to the pregnancy but to the toxicosis that was developed over a period of time before her pregnancy.

The body attempts to provide the ideal conditions for the developing fetus. It therefore goes about a "house-cleaning" to eliminate toxins that would make these conditions less than perfect. Many changes

take place in a woman's body during pregnancy. Glands long dormant awaken to activity. Her whole body undergoes a strengthening, renovating process. If a woman has been living healthfully, there will be no trace of unpleasant symptoms. If renovating work is needed, then a fast is called for.

A few days' fast (longer fasts should not be undertaken during pregnancy) will enable the body to rid itself of toxins and thereby provide suitable surroundings for the fetus. After the fast, if a healthful lifestyle is led, health will be kept throughout pregnancy.

## 3. Who Should Not Fast

As Dr. Shelton points out, the dangers of fasting are so slight they are almost negligible or insignificant. He lists several contraindications to fasting that are often made.

1. Fear of the fast on the part of the patient—It is best to educate the patient of the purpose of the fast and what to expect during the fast. Let him do some reading about the fast and about other people's experiences. Once his fears are alleviated, a fast can commence. Also, the fast itself often dispels such fears.
2. Extreme emaciation—People who are extremely emaciated may go on short fasts with definite benefits. When such people do fast, it is wise to keep the fasts short, and this may mean breaking it before hunger returns. But with proper living between fasts these people can be restored to health. Dr. Shelton feels that it is only through the fast that such individuals can be restored to health.
3. In cases of extreme weakness or of extreme degeneration—Even in these cases short fasts often prove to be extremely beneficial but they should be supervised. In the later stages of cancer, even a long fast will not result in health, but may perhaps relieve some discomfort or lengthen life for a few more days.
   Weakness itself is not a contraindication for fasting but is a sign that the body is in a state of toxicosis and is ready for an eliminative crisis. In this case, supervised fasting is very beneficial. Persons with heart disease have been known to make full recoveries following a fast but close supervision is again required.
4. In cases of inactive kidneys accompanied by obesity—It is said that in such cases, the tissues may be broken down faster than the kidneys are able to eliminate them. Dr. Shelton has fasted obese individuals with inactive kidneys with successful results. Most often the kidneys are enervated due to high-protein diets and other dietary abuses and a rest is exactly what is needed. The rate of tissue breakdown is not more than the body can deal with.
5. Difficult breathing—If the breathing difficulty is due to heart impairment, the fast should be closely watched and if the heart shows signs of weakening, the fast should be broken. However, Dr. Shelton says that he has fasted many such cases with beneficial results.

## 4. Fasting In Deficiencies

Most so-called deficiency diseases are not due so much to lack of essential nutrients as they are due to inability to *absorb* and *utilize* those nutrients. Fasting will enable the body to eliminate toxins, restore vital energy, and readjust and realign itself so that all available nutrients can be efficiently utilized. If a healthful diet is eaten after the fast, no deficiencies will arise.

In fact, certain vitamin and mineral deficiencies have been known to correct themselves during the fast while no food is being taken. The body will normalize itself during the fast and utilize stored nutrients.

## Part III: How Long, How Often

### 1. Fasting Vs. Starving

There is a difference between fasting and starvation. Starvation results from food being denied to a person whose reserves have been exhausted, and, in its extreme stages, leads to death. Fasting, on the other hand, is a period of rest and renewal with a potential for remarkable benefits with the body using its stored reserves as food.

We are not so much concerned with how long it will require a man to die from want of food, but how long he can safely and beneficially abstain from food. A little over three months are the longest fasts that have been recorded in man and these have been in overweight individuals. The man of moderate weight would not fast so long; and he would not need such an extended period of fasting. It has been said that a well-nourished adult can remain alive from fifty to sixty days without food, *provided, of course, that he has water.* Hundreds of longer fasts have been recorded and most of these have resulted in great benefit to the fasters.

### 2. Length Of The Fast Is Guided By Developments

The organism requires time to do its "housecleaning." If we were to arbitrarily set a time limit for this important work, we would stand in the way of recovery. The best way to determine the length of the fast is to be guided by the developments. It is not possible to know how long it will take a stomach ulcer to heal, or for an asthmatic to attain full recovery. Since it is not advisable to break the fast in advance of complete healing, you must be guided by certain signs.

When symptoms disappear, it is a favorable sign, but it still does not indicate that the fast is to be broken. One of the surest indications is a clear tongue, sweet breath, and return of hunger. This may occur after two days or two months or longer depending on the individual.

Occasionally, it is necessary to break the fast before these signs manifest themselves. A sudden fall in blood pressure; a rapid, feeble and irregular pulse; a disturbing dyspnea (difficult breathing) may indicate that the fast should be broken. The attitude of the patient and his emotional stability are factors that cannot be ignored. If the patient is unwilling to continue the fast or becomes excessively worried and anxious, the fast may have to be terminated.

Although it is always best to continue a fast until its natural termination, breaking the fast under such conditions will do no harm as long as proper feeding is carried out after the fast. After a while, a second fast may be undertaken with benefit.

### 2.1 The Tongue and the Breath

Soon after entering upon a fast, the tongue coats heavily, and this coat may continue to increase as the fast progresses. This coating will persist during the fast up to a certain point when it begins to spontaneously clean itself up. As long as the body is actively eliminating toxins, the tongue will remain coated, but when this elimination begins to decrease, the tongue will clear up and remain clear. Dr. Hereward Carrington says, "A short while before the return of hunger, this cleansing process of the tongue commences and continues until the tongue is perfectly clean, assuming a beautiful pink-red shade—rarely or never seen in the average man or woman; and the terminus of this cleansing process of the tongue is absolutely coincidental with the return of hunger and of health."

Carrington stated that this coated condition of the tongue indicates the condition of the mucous

membrane throughout the alimentary canal since this membrane is so closely interrelated and connected. I would add that this foul condition of the tongue not only is an indication of the mucous membranes of the intestines but also of the health of the mucous membranes throughout the entire body.

If the fast is broken before the tongue clears, the tongue will become clean after eating has resumed. This indicates that elimination has been halted, but it does not necessarily mean that elimination has been completed. It is always best to fast until completion whenever possible.

The breath is also an indication of elimination of toxic debris. Although the breath may be somewhat foul before the fast, during the fast it becomes more so. This peculiar odor of the breath continues during the fast and only becomes sweet when the fast is ready to be broken after elimination has ceased. Dr. Carrington associates bad breath with elimination via the lungs. He says, "Precisely coincidental with the heavy coating of the tongue—following immediately upon the commencement of the fast—is the greatly increased foulness of the breath, showing unmistakably that the lungs are assisting in the speedy elimination of all corrupt matter from the system with the greatest possible speed."

The above two conditions serve as a unique and constant guide as to the condition of the tasting patient.

## 3. How Often

As regards to how often to fast, we again must say, rely on instinct. When hunger disappears or acute symptoms appear, a fast is needed. It is important to understand that fasting is a tool that enables the body to redirect its healing powers where needed. It is not a "cure." You should not use fasting as a crutch to lean upon every time you choose to live unhealthfully between fasts. Fasting is but one part of an entire way of living that will maintain health. In between fasts, the other conditions for health should be adhered to. This includes proper food and water, exercise, sunshine and fresh air, rest and sleep, and emotional poise.



## Questions & Answers

**Does everyone undergo violent crises during the fast?**

> Disagreeable crises only occur in a small percentage of cases. Everyone can fast for a few days without inconvenience. According to Dr. Shelton, most fasters go through even a long fast with nothing more dramatic developing than they experienced during the regular activities of life. Most of the work of excretion is carried on silently and without the production of troublesome crises. In the human body, it is the task of the excretory organs to expel all waste and all foreign material that may find their way into it. They continue to do this, usually with greater efficiency, during the fast.

**Can older people fast?**

> The older person can fast with beneficial results if done under supervision. Dr. Shelton has conducted numerous fasts in both men and women whose ages ranged from sixty-five to eighty-five. Many of these patients had long fasts from thirty to over forty days.

**Could you review the basic rationale of fasting?**

Dr. Shelton outlined four important facts about fasting; he says:

1. Fasting, as a period of physiological rest, affords the tissues and organs of the body an opportunity to repair, renew, and replenish themselves. Damaged organs are repaired; worn out and diseased cells are discarded and cast out.
2. Fasting, as a period of physiological rest, affords an opportunity for recuperation of depleted energy.
3. Fasting, because it compels the body to rely upon its internal resources, forces the tearing down (by autolysis) of growths, effusions, infiltrations, deposits, accumulations and excesses. These are thoroughly overhauled, their usable constituents are employed in nourishing the vital tissues, their unusable portions are excreted.
4. Fasting, by the foregoing and related processes, enables the body to regenerate itself to a marked degree. It becomes younger in physiological condition. Its functions are improved, its structures repaired, and its fitness to live increased.

**I have heard that fasting has a rejuvenating effect. Is this true?**

> Yes, this is true. The body is constantly going through a process of regeneration. This daily renewal of cells and tissues delays old age and early death despite the abuses that are imposed upon the bodies of most people. Fasting enables the processes of renewal to out-distance the processes of degeneration and the result is a higher standard of health. Regeneration of the muscles, tissues, and bones is possible through this method. During the fast, we may actually tear down much of the body and then rebuild it and have a renewed one.
>
> The rejuvenating effect upon the skin is visible to all. Lines, wrinkles, blotches, pimples, and discolorations disappear. The skin becomes more youthful, acquires a better color and a better texture. The eyes clear up and become brighter. One looks younger. The rejuvenation is also present throughout the entire body.



## Article #1: When To Fast by Dr. Herbert M. Shelton

Called the "hunger cure" by European nature curists and many early Hygienists, fasting has shown by "large experience," as Robert Walter, M.D., expresses it, "... that a moderate hunger-cure is exceedingly beneficial in the great majority of diseases. Indeed, in many of them the capacity to appropriate food is entirely destroyed, the very thought of it becoming repugnant to the individual."

"Rest and the hunger-cure," Walter regarded as the "proper treatment" of those who were suffering from overwork and overeating. He pointed out that when there was functional impairment, coated tongue, and bad breath, no food should be taken. When uncomfortable in any way, stop eating until feeling well, he advised.

Kittridge says, "If a person has a coated tongue, fetid breath, and bad taste in the mouth, you may be pretty sure it will do him good to fast—appetite or no appetite." Judgement is required, wrote Kittridge, to determine when to put a person who still has an "appetite" on a fast. "When they don't have a desire for food," he continues, "no sensible man will think of eating or giving others to eat."

It is a mistake to think that food is a daily need under all circumstances. To constantly feed an irritated stomach is like kicking a man when he is down. Constant tampering with the stomach when it is as much in need of rest as the remainder of the body is to invite disaster. It is no uncommon thing to find

sufferers whose disease is largely due to overfeeding by their physicians in an effort to affect a *cure*. We see people gradually dying of malnutrition—malassimilation, starvation—in spite of the fact that they are eating regularly. We see physicians urging invalids to eat, urging the eating of foods that should be excellent for a well person; yet the patient, doing all he can to comply with the physician's instructions continues to waste. He lacks power to digest the food. The physician needs to know that continued eating under such conditions can kill. If eating does not prevent sickness, how will more feeding restore health? How will overfeeding be helpful?

Fasting is useful only because of wrong life. It is better to live right than to turn into excesses, and then fast. It is also better to take a short fast early than to permit yourself to get into a condition in which a long fast is required. If a fast is taken at the first signs of disease, perhaps ten days will be adequate. If, after years of suffering and considerable loss of weight, a man may still safely fast for more than forty days, surely a shorter fast would have been well borne at the beginning.

Writing in *The Hygienist*, June 1912, Dr. R. R. Daniels of Denver, Colorado, gave an expression to a view that has been widely held and that is still held in certain circles. He said: "... the sick should fast only when the system is unable to care for food. ... Always in acute disease when fever is present, or when in the absence of fever the patient is suffering from shock. ... In illness without fever but in which the appetite is entirely lost or the organs of digestion are entirely disabled ... frequent disturbances of digestion or elimination due to overfeeding in which the appetite is entirely lost or the organs of digestion are entirely disabled ... frequent disturbances of digestion or elimination due to overfeeding in which the appetite is temporarily lost. ... Except for the occasional 'storms' attended by intense pain or other distress which inhibits digestion to the extent that it is impossible to take care of food, fasting is not the best treatment for chronic disease. While in chronic disease, the power to take care of food is always impaired, often badly impaired, nevertheless there are usually some foods which can be digested and utilized, and these should be given ... fasting should be used only when disease is present to the extent that digestion is suspended ..."

This view was shared by Dr. Henry Lindlahr (Chicago) of Nature Cure fame, who held that fasting should be employed only in acute disease and during the crises that arise in chronic disease. Many others have accepted this view of fasting, despite the fact that, even in those many thousands of cases of chronic disease that complain of a lack of desire for food, and that everything they eat causes suffering, there is present the power to digest some food. Dr. Daniels gave it as his opinion that in chronic disease "if the feeding is limited only to the foods which can be utilized, chronic disease can be eliminated more rapidly and the nutrition built up faster than by fasting."

Although frequently employing and advising the fast in conditions in which there is considerable digestive power, Tilden often expressed views that harmonized with the view of Daniels and Lindlahr. For example, he once wrote that, except under certain circumstances (circumstances that are relatively rare) he did not believe in long fasts. Then he added: "It is better to adopt a rational and suitable diet and take from one to two and three years to assume the normal." His very language implies that a normal state may be attained earlier by the use of the fast, although he thinks that the slower method is preferable.

With this view I find myself in strong opposition. I am fully aware that a much longer time is required for the evolution of good health if the fast is not employed in preparation for and in initiating a new way of life, but I know of no valid reason why one should be content to take so long when, with the fast, he can safely and advantageously shorten the time required. Must we always await the development of a severe crisis before we avail ourselves of the advantages of a period of abstinence? Must we deny ourselves the benefits that accrue from a period of physiological rest merely because we have no fever and no severe pain? Or can we fast at intervals and prevent the evolution of a body-state that necessitates a crisis? This, to me at least, would seem to be the wiser plan.

To this end the practice, a very ancient one but followed by many people today, of fasting one day out of each week, is rarely adequate. The ancient Aryans abstained from all food and drink one day out of

every seven; the Mongolians fasted every tenth day; the Zends rejected all food every fifth day; the *Bible* mentions the practice among certain of the ancient Jews of fasting one day a week. All of this is certainly beneficial, but our present view is that one day a week of fasting lacks sufficient cumulative value to be adequate to meet the requirements of the chronically ill.

Daniels says, "Missing a meal or two when 'out of sorts' or feeling badly ... is the most common use for fasting. A coated tongue, no appetite and general lack of vigor and energy mean that you should miss a meal or two and give the body an opportunity to right conditions. This simple treatment will frequently avoid attacks of serious illness." Thus, while he agrees that the fast may be employed as a means of preventing the evolution of crises, he too severely limits its use.

I am of the opinion that the rule he gives for determining the length of the fast should apply to the chronic sufferer as well as to the sufferer with acute disease. In discussing how long the fast should be continued, he says: "This is a difficult question to answer in a general way since each case is a law unto itself. One thing is certain, however; to get the best results, no food should be taken until the power of digestion and nutrition has returned. In those having fever, food should not be taken until the fever has permanently subsided. At this time, the appetite will return and the tongue will become clean and moist, indicating that the digestive fluids are present in the stomach and intestines. In general, a fast should be continued in the cases suitable for fasting until the above conditions of the tongue and appetite prevail, until the patient is free from distress, and until he can take, without disturbance, the foods mentioned in the following paragraph."

If the chronic sufferer has a poor appetite or no appetite, if his tongue is coated, his taste foul, if there is afoul odor to his breath and in general he does not feel good, if there is pain and distress, or as they often express it: "Nothing I eat seems to do me any good," why shall he not fast at once and not wait for the evolution of a crisis? If the body gives every indication that it has accepted the proffered opportunity to rest and clean house, what is the need for arbitrarily limiting the duration of the fast?



## Article #2: Physical Rest by Dr. Herbert M. Shelton

Commonly we say that the activities of an organism should be proportioned to its nutritive intake and, keeping this in mind, we should have no difficulty in understanding that with the shutting off of income of food, there should be some reduction of physical activity—although how much this reduction should be is not immediately determined.

On the whole, we adopt the position that the faster should rest—physically, sensorially, and mentally. Here we are thinking more of the needs of the sick than of the requirements of the fasting organism. It is the profoundly enervated individual who is in need of rest. The more he can relax and rest, the more rapid will be his recuperation and the more efficient will be the processes of repair that go on in his body. The relatively healthy individual, who is much overweight and who is fasting to reduce weight is certainly not to be placed in the same class with the sick and weak man or woman, who is fasting for physiological rejuvenation.

This, I think, well illustrates a principle that I want to stress at this point: namely that any rule that we can lay down for the conduct of a fast is in the nature of a generality and must be adapted to the individual faster. To insist that all fasters adhere to the same rules to the same extent is to ignore all the various individual factors that render possible or necessary certain modifications of the fasting program that fit it to individual needs and conditions. We cannot deal with people as though they are exact

replicas of each other and as though the condition of one is identical with the condition of another.

The primary purpose of rest is the conservation and recuperation of energy. I make no pretense of knowing what "life-energy" is nor its source. I think that a knowledge of this is not essential to the understanding of our subject. We are all well aware that sleep, which is the most complete form of rest (there being the fullest rest of mind and senses, as well as complete physical relaxation in sleep), is a period of recuperation and replenishment. Rest and relaxation in a quiet place, with no worries or anxieties on the mind, but in the wakeful state, is almost equally a period of recuperation and replenishment. Rest and sleep are nature's grand representative, recuperative and restorative processes; activity and excitement are grand representative processes of expenditure.

Rest does not mean a complete suspension of all of life's activities, as in periods of suspended animation. Indeed, during sleep, certain of the body's most essential activities are most actively carried on. When, in *Life's Great Law*, Dr. Walter stated that the success of the work of the living organism is inversely proportioned to the degree of its activity, he had in mind only certain more obvious forms of activity. The fact is that, the success of the work of the organism is directly proportioned to the degree of its activity in certain basic functions. Witness the processes of growth and repair that are carried on very actively during sleep. Whatever replenishment may mean, in the final analysis, it is a process that is carried on most rapidly during sleep. It may be correct to say that the anabolic activities (that is, the building up processes) of life are most efficient during this period.

I fully agree with Dr. Daniels when he says that "rest from physical exertion is necessary when fasting for any length of time," but only if we limit this to the fasting sick individual. He says that "unless he is really ill the man of average vigor can go without food for twenty-four hours and continue his usual work, but if his condition is such that he should go without food for a longer time, he should rest absolutely." Thus he also makes a distinction between the healthy and the sick individual. I again agree that "if he (the faster) has fever he should go to bed and remain (there) until the temperature is normal and digestion has returned."

When he again stresses the need for rest, saying, "the man who is not possessed of the average physical vigor should not miss more than one meal without discontinuing his usual work and resting," he may overstate the case for rest while fasting. Missing two or three meals without going to bed and resting is not catastrophic in its effects upon the average chronic sufferer. True, it does not provide the benefits that the fast coupled with rest provides.

I do agree that "the idea that man should go without food for long periods of time and keep up his usual work, or indulge in walks across the country, and other athletic stunts, is all wrong." In the early part of this century, when Dr. Daniels was writing, many fasting enthusiasts accomplished stunts requiring extraordinary exertions while fasting. A little later, the marathon runner and man of vigor and endurance, George Hasler Johnson, attempted to walk from Chicago to New York while fasting. These feats of physical strength and endurance are of tremendous value as showing the resources and possibilities of the human organism and they provide us with a basis for confidence when we undergo a fast, but they have no place in any rational plan of caring for the sick man or woman.

Rest while fasting not only provides for comfort but it hastens the processes of recovery. It is important that we keep in mind that the sick man is enervated and that rest is the means of recuperation.

## Article #3: Pounds That Slip Away by Dr. Herbert M. Shelton

The big business of losing weight, figure control, diet-in-comfort plans and similar programs have developed into one of the great industries of our age. Everyone considers himself an expert. Fad diets rage for a few months and give away to the next crash wonder. This week it is an ice cream diet. The next it is bananas. The week after that a protein diet, nothing but juicy steaks. Eat yourself *thin*!

Overweight is becoming an increasingly perplexing problem, not only for adult men and women, but for children also. Several facts are responsible for this, but, in general, we may say that the increased abundance of food, together with the increased income of the American people, on the one hand, and the changes in work resulting from the shortening work day, shortened work week, modern transportation, and the many labor-saving devices that take much of the burden off the shoulders of men and women, have resulted in the increase of weight. Just at a time when our reduced labors have reduced our need for food, increased production, artificially increased palatability, and increased income have served to increase our food consumption.

Hygienists are realists. Nothing can circumvent the fact that the quickest, surest, safest way to lose weight is by fasting, and the surest way of maintaining the proper weight level is by refusing to return to the wrong eating habits.

The disappointingly slow method of losing weight by "going on a diet" is rarely very successful for the reason that it is a long drawn-out process requiring more self-control and a much longer period of control than the average person is capable of. A not uncommon outcome of such programs is that, after a brief period, during which time a few pounds are lost, the obese individual returns to his prior overeating and puts back all the weight lost, and often additional pounds. Only rarely does one see an obese individual stick to a reducing diet for a prolonged period.

To begin with, as I have stated in many lectures, and will continue to remind the reader, do not enter upon a fast on your own without the guidance of an expert in the field of conducting fasts. While fasting is perfectly safe as a health and weight-reducing measure, it does involve the complex human organism, and it should be watched over and directed at all times by a qualified person who knows what he may expect, or what trouble signs to watch for during the fast.

How much can one expect to lose? The loss rate of course varies with the individual, but the average for a protracted fast runs around two-and-one-half pounds a day. Is this heavy weight loss safe? It is a long as it is conducted under proper controls and with proper and continuing rest. Let me cite here briefly the most striking advantages of fasting for weight reduction:

1. Safe rapid loss is registered on the fast.
2. The fast is far more pleasant than the reducing diet— the nagging desire to eat is missing.
3. Weight loss may be secured without resulting in flabbiness or sagging of the skin and tissues. However, this is not true of elderly persons.

When the overweight individual undergoes a marked reduction of weight, several indications of improved health follow immediately:

1. Breathing is freer.
2. There is greater ease of movement.
3. There is loss of "that tired feeling."
4. There is a disappearance of the sense of fullness and discomfort in the abdomen.
5. Symptoms of indigestion cease to annoy.
6. Other discomforts cease.
7. Blood pressure is lowered and the load the heart has to carry is lessened.

All of these evidences of benefit are noticeable, but the improvements are commonly out of all proportion to the weight loss, thus indicating that reduction of the amount of food eaten itself resulted in improved health. There is every reason for thinking that the greatly-reduced intake of sugar, starches, and fats and the overall reduction of the amount of food eaten is beneficial.

In 1962, a woman began to fast to reduce weight under my guidance. At the conclusion she told me: "It has been an amazing experience—the pleasure of seeing those pounds melt away. I never saw fat go so fast." Another woman remarked after a fast of fifteen days undertaken for reducing: "I was at a well-advertised health spa. They kept me on a diet of seven hundred calories a day. I was hungry all the time. This fast has been a pleasure."

A third woman said after a week of fasting to lose pounds: "This has been the most remarkable experience of my life. I have enjoyed this fast and rest. I never knew before that people fast, but I have enjoyed it."

Are these expressions typical? Hardly. Fasting is not always the pleasant experience these women found it to be, but it is rarely disagreeable enough to justify discontinuing it until one's goal has been attained. And it is frequently a far more pleasurable experience than many people have in their daily eating habits. In many conditions of life, every meal is followed by discomforts and even actual pain. In these states, the fast is often such a relief that it becomes a joy.

There is always great satisfaction in watching the fat melt away at the rate of two to four pounds a day. To lose nineteen pounds in a week is a highly pleasing experience (there are exceptions in which the weight loss is not so great) for the first several days of the fast. The rate of loss is not uniform and there are periods when the scales register no loss for a day or two at a time. The rapid loss registered at the beginning of the fast does not continue through the whole of a long fast.

Not only is there safety in fasting for weight reduction, there is also greater ease than there is in dieting. One reason for this is that unlike, almost all dieters, the faster is not hungry all the time. His taste buds are not constantly tempting him. The flood of gastric juices is not being constantly activated.

The faster may experience some desire for food during the first or second day of the fast or may not desire food at all. Hunger subsides usually by the end of the third day. And unless the fast is broken for some reason, the faster can continue without experiencing either weakness or hunger.

I state these facts out of my own personal experience but they are also verified by investigations. Two series of experiments carried out by regular medical men in accredited hospitals, have developed empirical evidence sufficient to satisfy the experimenter scientifically that fasting is not only a safe and speedy way of reducing weight, but is also the most comfortable way of reducing.

One of these experiments was carried out by Lyon Bloom, M.D., in the Piedmont .Hospital in Atlanta, Georgia, where he conducted a lengthy series of experiments on fasting in reducing weight. This was followed up by Garfield Duncan, M.D. of the University of Pennsylvania who is regarded as an authority on weight reduction and whose independent tests include Bloom's findings and conclusions.

These two medical investigators found that fasting men lose an average of 2.6 pounds a day, while women tasters lose an average of 2.7 pounds a day. Both Bloom and Duncan confirm that the fasters were not hungry. Instead, they reported an amazing absence of hunger with no apparent mental or physical strain. One of the fasters was quoted as saying: "I feel better than ever before in my life." A woman faster, after forty-eight hours without food, volunteered the information that she was not half so hungry as she used to be after missing a single meal.

Bloom is quoted, from the summary of the experiments: "The present preoccupation with eating at regular intervals leads to the misconception that fasting is unpleasant." He stated further, that, in his opinion, as the result of the findings of these tests, fasting is well tolerated by the human system provided there is free access to water. In a later series of experiments, Bloom permitted a faster to go four consecutive weeks without food, with no ill effects. In reading his report of experiments to the

111th Annual Meeting of the American Medical Association, Duncan declared: "although short periods of total fasting may seem barbaric, this method of reduction is marvelously well tolerated." He added that we have evidence that these obese persons fully enjoyed the total fasting periods, due probably in part to their elation that hunger is not a problem while major reductions in weight are being accomplished.

Both men reported that in longer fasts the weight loss levels off to about a pound a day. Bloom stated fasting has also proved to be an extremely effective method of weight control.

In the healthy individual who is fasting only to lose weight, I do not insist on rest in bed but permit considerable exercise—even at times giving a prescribed course of physical workouts. This does not increase the rate of loss as much as one might expect, but it does assist in retaining the tone of the tissues.

The amount of exercise required to reduce weight by exercise alone is far more than the average person is willing to undertake and more than many of them should undergo. To lose one pound of fat requires playing twenty-three holes of golf, sawing wood for ten-and-one-half hours, riding a horse for approximately forty-three miles.

Exercise always has the added hazard of increasing the appetite. During the fast it should be controlled and used only to the extent that the adviser feels desirable for the individual undergoing the fasting process.

While there are varying rates of metabolism, my experience indicates that most obesity is due, not to glandular disorders, but to habitual overeating. There is little truth in the idea that with some people everything they eat turns to fat. The real truth is that they are eating not only more than they should, but more than they really want.

How much weight loss per day is safe in fasting? The answer here is that since fasting is total abstention, the body itself decides what rate loss is proper. When fat tissue is soft and flabby, weight is usually lost rapidly in the early days of the fast. I have seen losses ranging from four to six pounds a day in fasting. The loss of twenty pounds in a week is not at all difficult in a great many cases.

With those who have a very low rate of metabolism, the rate of loss from the outset of the fast is slow—at times even disappointingly so. Let me reiterate once more, any fasting of more than a few days should be done only under experienced supervision. In all cases where there is any organic defect or chronic ailment, such as heart disease or blood deficiency, even the shortest fast should be supervised. Again let me say there is no essential danger in fasting but one must be properly safeguarded against any danger from hidden conditions that might reveal themselves when no food is taken.

I cite the possibility in order to give the rounded picture of fasting. Let me reassure the reader, however, that such dangers are rare. If the reader is in good health, and follows the proper procedures under proper experienced guidance, the fast should be not only a way of losing poundage, but an exhilarating and exciting adventure, the beginning of a new way of thinking about oneself.



## Article #4: Does Fasting Cure Disease? by Dr. Herbert M. Shelton

We do not claim that fasting cures disease, but simply that it enables the organism to heal itself. What, then, does fasting do?

1. It gives the vital organs a complete rest.
2. It stops the intake of foods that decompose in the intestines and further poison the body.
3. It empties the digestive tract and disposes of putrefactive bacteria.
4. It gives the organs of elimination an opportunity to catch up with their work and promotes elimination.
5. It reestablishes normal physiological chemistry and normal secretions.
6. It promotes the breaking down and absorption of exudates, effusions, deposits, "diseased" tissues, and abnormal growths.
7. It restores a youthful condition of the cells and tissues and rejuvenates the body.
8. It permits the conservation and recanalization of energy.
9. It increases the powers of digestion and assimilation.
10. It clears and strengthens the mind.
11. It improves function throughout the body.

When we say that fasting is neither a *cure-all* nor a *cure* at all, we do not thereby intend to limit its scope or its field of usefulness. Indeed, the more we learn about this element of nature's hygiene, the more useful we find it to be. As it is used as a rest and is employed where there is great need of a physiological housecleaning, it is effective in all states of disease, even in deficiency diseases, where it is commonly thought that more of certain food factors are essential, the fast has proved to be very helpful. Thus, what may appear on the surface to be an indiscriminate resort to the fast, turns out, upon analysis, to be no more indiscriminate than the employment of water or food or exercise in the same great variety of conditions. When we once grasp the fact that fasting is not employed as a cure and that it is not something that is good in certain so-called specific diseases, but may not be good in other so-called specific diseases, we understand that its use in all the conditions of impaired health is not an indiscriminate use.